



11696 U.S. PTO

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PTO/SB/50 (06-03)

Approved for use through 01/31/2004. OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Mail Stop Reissue Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Attorney Docket No.	109960.220 US5
	First Named Inventor	Rollhaus et al.
	Original Patent Number	6,343,063
	Original Patent Issue Date (Month/Day/Year)	01/29/2002
	Express Mail Label No.	EV225204946US

APPLICATION FOR REISSUE OF:
(Check applicable box) ☒ **Utility Patent** ☐ **Design Patent** ☐ **Plant Patent**

APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent format
(amended, if appropriate)
4. ☐ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy)
(37 CFR 1.175) (PTO/SB/51 or 52)
6. ☐ Power of Attorney
7. ☒ Original U.S. Patent currently assigned? ☒ Yes ☐ No
(If Yes, check applicable box(es))
 - ☒ Written Consent of all Assignees (PTO/SB/53)
 - ☒ 37 CFR 3.73(b) Statement (PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix)
or large table
9. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CFR)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. ☒ Statement of status and support for all
changes to the claims. See 37 CFR 1.173(c).
11. ☐ Original Patent Grant
 - ☐ Ribbioned Original Patent Grant
 - ☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
13. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS
Citations
14. ☐ English Translation of Reissue Oath/Declaration
(if applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
Application Data Sheet;
Addendum to Declaration;
17. Other: _____
Statement of Facts and Addendum; and
Petition Pursuant to 37 CFR 1.47(a)

17513 U.S. PTO
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18. CORRESPONDENCE ADDRESS

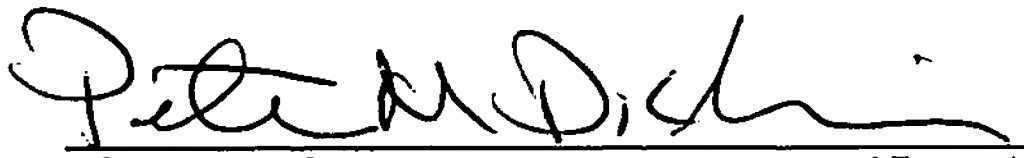
<input checked="" type="checkbox"/> Customer Number.	23483	OR	<input type="checkbox"/> Correspondence address below
Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

Name (Print/Type)	Peter M. Diciara	Registration No. (Attorney/Agent)	38,005
Signature		Date	January 29, 2004

This collection of information is required by 37 CFR 1.173. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 109960.220US5		
Claims as Filed – Part 1								
	(1) Claims in Patent	(2) Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee		Rate Fee	
Total Claims (37 CFR 1.16(j)) Independent claims (37 CFR 1.16(i))	(A) 6	(B) 6	**** 0 =	x \$ _____ =		or	x \$ _____ =	
	(C) 2	(D) 2	* 0 =	x \$ _____ =			x \$ _____ =	
				Basic Fee (37 CFR 1.16(h))			\$ 770.00	
				Total Filing Fee			OR \$ 770.00	
Claims as Amended – Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee		Rate Fee
Total Claims (37 CFR 1.16(j))	*** 61	MINUS	** 20	* = 41	x \$ _____ =		x \$ 18 =	738.00
Independent Claims (37 CFR 1.16(i))	*** 22	MINUS	***** 2	= 20	x \$ _____ =		x \$ 86 =	1720.00
				Total Additional Fee		\$	OR	\$ 3228.00
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B – A); if "A" is 20 or less, use (B – 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> Please charge Deposit Account Number <u>08-0219</u> in the amount of <u>\$3228.00</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account Number <u>08-0219</u>. A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of \$ _____ to cover the filing/additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p style="text-align: center;">WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="width: 45%;"><p>January 29, 2004 _____ Date</p><p>38,005 _____ Registration Number, if applicable</p></div><div style="width: 45%; text-align: right;"><p> _____ Signature of Applicant, Attorney or Agent of Record</p><p>Peter M. Dichiara _____ Typed or printed name</p></div></div>								

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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PTO/SB/17 (10-03)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 130.00

Complete if Known

Application Number	TBA
Filing Date	01/29/2004
First Named Inventor	Rollhaus, et al.
Examiner Name	TBA
Art Unit	TBA
Attorney Docket No.	109960.220 US5

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit Account Number
Deposit Account Name

08-0219

Hale and Dorr-LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$)			0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	
Multiple Dependent	-3** =	X	
		0	0

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)			0.00

**or number previously paid, if greater, For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051 130		2051 65		Surcharge - late filing fee or oath	
1052 50		2052 25		Surcharge - late provisional filing fee or cover sheet	
1053 130		1053 130		Non-English specification	
1812 2,520		1812 2,520		For filing a request for ex parte reexamination	
1804 920*		1804 920*		Requesting publication of SIR prior to Examiner action	
1805 1,840*		1805 1,840*		Requesting publication of SIR after Examiner action	
1251 110		2251 55		Extension for reply within first month	
1252 420		2252 210		Extension for reply within second month	
1253 950		2253 475		Extension for reply within third month	
1254 1,480		2254 740		Extension for reply within fourth month	
1255 2,010		2255 1,005		Extension for reply within fifth month	
1401 330		2401 165		Notice of Appeal	
1402 330		2402 165		Filing a brief in support of an appeal	
1403 290		2403 145		Request for oral hearing	
1451 1,510		1451 1,510		Petition to institute a public use proceeding	
1452 110		2452 55		Petition to revive - unavoidable	
1453 1,330		2453 665		Petition to revive - unintentional	
1501 1,330		2501 665		Utility issue fee (or reissue)	
1502 480		2502 240		Design issue fee	
1503 640		2503 320		Plant issue fee	
1460 130		1460 130		Petitions to the Commissioner	
1807 50		1807 50		Processing fee under 37 CFR 1.17(q)	
1806 180		1806 180		Submission of Information Disclosure Stmt	
8021 40		8021 40		Recording each patent assignment per property (times number of properties)	
1809 770		2809 385		Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770		2810 385		For each additional invention to be examined (37 CFR 1.129(b))	
1801 770		2801 385		Request for Continued Examination (RCE)	
1802 900		1802 900		Request for expedited examination of a design application	
Other fee (specify) 37 CFR 1.47(a) Petition					130.00
SUBTOTAL (3) (\$)					130.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

(Complete if applicable)

Name (Print/Type)	Peter M. Dichiaro	Registration No. (Attorney/Agent)	38,005	Telephone	617-526-6466
Signature		Date	01/29/2004		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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Express Mail Label No. EV225204946US

Date of Deposit: January 29, 2004

Attorney Docket No. 109960.220 US5

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Rollhaus, <i>et al.</i>	Group Art Unit	TBA
Application No.:	TBA	Examiner	TBA
Filing Date:	January 29, 2004		
Title:	Machine-Readable Optical Disc with Reading-Inhibit Agent		

Mail Stop Reissue
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PETITION PURSUANT TO 37 C.F.R. § 1.47(a)

Applicants hereby petition to allow the above-identified application to be made on behalf of inventor Irwin Winkler.

Accompanying this petition are:

- (1) a declaration signed by the remaining inventors; and
- (2) a Statement of Facts in Support of Filing on Behalf of an Unavailable Inventor signed by M. Scott Carey, Vice President of Legal Affairs, at Flexplay Technologies, Inc. containing attachments in support thereof.

Mr. Winkler's last known home address is:

24 Gould Road
Arlington, MA 02476-8116

The Commissioner is authorized to charge Deposit Account No. 08-0219 the \$130.00 fee to cover the cost of the petition according to 37 C.F.R. § 1.17(h). No other fees are believed to be due in connection with this submission. However, please charge any fees or credit any overpayment to Deposit Account No. 08-0219.

02/04/2004 HDEMESS1 00000012 080219 10767961

04 FC:1460 130.00 DA

If there are any questions, the Examiner is invited to contact the undersigned at the below-listed telephone number.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Peter M. Diciara", written over a horizontal line.

Peter M. Diciara, Esq.

Reg. No. 38,005

Attorney/Agent for Applicants

Date: January 29, 2004
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Fax: (617) 526-5000